

APPLICATION FOR REMOTE ACCESS TO THE COURT'S PUBLIC ACCESS NETWORK (CPAN)

This application must be completed by each individual user.

The approval of this application is at the Clerk of the Circuit Court's discretion. By signing this application, the subscriber acknowledges and accepts the terms and conditions of the *Subscriber Agreement for Remote Access* as incorporated by reference herein. **All Information below is mandatory.**

SUBSCRIBER'S LAST NAME: _____

SUBSCRIBER'S FIRST NAME: _____

BUSINESS NAME: _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

UNITED STATES CITIZEN: **Yes** **No** **(Please Circle One)**

SIGNATURE: _____

I certify that the information above is true and correct.

City/County of: _____

State of: _____

I, _____, a Notary Public, do hereby certify that on this _____ day of
(Name of Notary)

_____, 20____, _____ personally appeared before me
(Name of Subscriber)

and swore and acknowledged that the statements contained herein are true and correct.

My Commission Expires: _____
Notary Public

Print or Type Name & Phone Number of Notary

For use by Circuit Court Clerk's Office only:

SUBSCRIBER ID: _____

PASSWORD: _____

EXPIRATION DATE: _____